U.S. Palent and Trademark Office; U.S. DEPARTMENT OF COMMERCE O A collection of Information unless; U.S. DEPARTMENT OF COMMERCE

		Superflute	27.7.1017.14.210	ionat ION	RESERD	(Information i	mess I	.8. DEPARTMEN lebiays a yallo of lloallon of Dooke	Hamper VB could unupe LOL COMMERC
		LICATION AS FILED	- PART ((Column 2)	. :	SMALI	LEKTITY	, PF	OTHE	RTHAN
1	FOR BABIQ FEE	NUMBER FILED	. NUMBER EXTRA	٦.	RATE (\$)		77	SMAU	LEHTITY.
4.	GEARCH FEE	. N/A	N/A	7	· NA	FEE (8)	- [6], 7 (RATE (\$)	FEE (8)
	(17 OFA 7.16(K), (0, or (m))	. N/A	N/A		N/A	-	₹:	. N/A	
	EXAMINATION FEE 197 OFF 1.16(0), (p), or (q)) TOTAL CLAIMS	N/A	. HYY		N/A		4	. N/A	1
13	NDEPENDENT CLAIMS	minus 20 =		1	4 4		4	, N/A	
L	37. OFR 1.15(N)	minus 3 =		- -		-	OR	× 50 =	
1	APPLICATION SIZE	PLICATION SIZE: If the specification and sheets of paper, the ap is \$250 (\$130 for small			x (05 =	-	╣.	× 210 =	
[モE 97 CFR 1.16(s))・	15 \$250 (\$130 for small	entity) for each					75	
1	JUTPLE DEPENDENT CLAIM PRESENT G7 CFR 1.16(s).]		
•	If the difference in column		185		J %.	370			
	APPLICAT		TOTAL			TOTAL			
APPLICATION AS AMENDED - PART II 11-36-5 (Column 1) (Column 2) (Column 2)									
-	CAIMS HIGHEST				SMALL E	HTTY	OR	OTHER SMALL	THAN.
ENT	AME	FTER PRE	MBER PRESENT VIOUSLY EXTRA ID FOR		RATE (\$)	AGDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL
MENDA	Independent Or OFR LIGHT	Minus 44	5 /		x 25 =:	FEE (\$)	ÖR	- 60	FEE (\$)
Įį.	Application Size Fee 3		p =		× 105 =		OR OR	× 50 = :	
۹.		F MULTIPLE DEPENDENT CLA			(2)			× 210 =	
		IM (37 CFR 1.16(0)	٠ لـٰ	185		.OR:	SHO		
	Colui	mn 1) (Cc	· ·		OTAL OD'L FEE	·i	OR.	TOTAL ADD'L FEE	
œ	1 00	HIG . HIG	HEST (Column 3)	<u></u>			. :		
-	Tolal AMEN	TER DMENT: PREV	MBER PRESENT OUSLY EXTRA		RATE (\$)	ADDI- TIONAL		RATE (\$)	ADDI- TIONAL
	tridependent	Minus **	=	1	15 =	FEE (\$)			FEE (\$)
AMILIA	DI DER LIGHT.	chinus	#	X	105		OR'	x 30 =1	
₹	Application 8ize Fee (37 CFR 1.16(s)) :FIRST PRESENTATION OF MULTIPLE PURPLES					<u>: </u>	OR L	x:210 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT OLAIM (ST OFR 1.160)				185		OR	3 90 NA	
	Kilhe entry in column't is Kilhe Highest Number P	eylously Paid For IN THIS eylously Paid For IN THIS	nn 2, kitle o'th column s	JA,	DTAL DD'L FEE		OR S	TOTAL ADD'L FEE	
	The Highest Number Pr The Highest Number Pre	reviously Paid For IN THIS reviously Paid For IN THIS Viously Paid For Italian in	SPACE is less than 20, en	ler *2	O'	··	2 · 1:		1

The Highest Number Previously Paid For In This space is less than 3, enter 37.

The Highest Number Previously Paid For Total or independent is the highest number found in the appropriate box in column 1.

This solication of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to the (and by the user) to process; an application, confidentially is governed by 35 U.S.O. 122 and 37 CFR 1.14. This collection is still indicated to take 12: minutes to complete; including gatheting, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FRES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Non used assistance in combletting the tour pall 1-800-b to-816% and select obilous